

Tocilizumab

Reduce direct handling to a minimum and wear appropriate personal protective equipment.		
Tocilizumab dosing is weight based; ensure accuracy of documented weight before administration		
CAUTION: High Administration Risk Rating		
Form & Storage	Each mL contains 20mg tocilizumab 80mg in 4mL concentrate for solution for infusion (20mg/mL) 200mg in 10mL concentrate for solution for infusion (20mg/mL) 400mg in 20mL concentrate for solution for infusion (20mg/mL)	Store vials in a refrigerator 2°C-8°C. Do not freeze.
Reconstitution	Already in solution Inspect for particulate matter prior to infusion Should be a clear to opalescent, colourless to pale yellow solution Dilute further before administration	
Compatibility & Stability	Sodium Chloride 0.9% ONLY	
Administration	IV Infusion - Withdraw a volume of sterile, sodium chloride 0.9% from a 100 mL infusion bag, equal to the volume of Tocilizumab concentrate required for the patient's dose, under aseptic conditions. - The required amount of Tocilizumab concentrate should be withdrawn from the vial and added to the 100 mL infusion bag. This should make an approximate final volume of 100 mL. - To mix the solution, gently invert the infusion bag to avoid foaming - Administer by intravenous infusion over 60 minutes. See *PPG-CUH-CUH-243 Policy Procedure and Guidelines for management of patients attending CUH infusion unit for more information.	
Monitoring	- Pre and post infusion vital signs - In advance of first infusion, blood tests are taken by GP/Phlebotomy (Full Blood Count, Renal/Liver/Bone profile, C Reactive Protein) - Bloods for subsequent infusions are taken on cannulation and used as a baseline for the next infusion - If after 3 months of infusions, the patient's bloods fall within the established parameters outlined in 7.2.4 it is acceptable with the Rheumatology team for blood testing on cannulation every 2 months (retrospective) - If the patient presents to the unit and meets any of the criteria in *7.7, medical review may be required prior to reconstituting medication for infusion	

This information has been summarised to act as a guide for those administering IV medication. The monograph should be used in conjunction with the drug data sheet and BNF for information on dose, adverse effects, cautions and contra-indications. Further information is available from Pharmacy on 22146 or 22542

	• Monitor for signs and symptoms of infection • Monitor for signs and symptoms of hypersensitivity or infusion related reactions (anaphylaxis, hypotension, pruritis, rash, urticarial or wheezing); most hypersensitivity reactions occur between second and fourth infusion • Urinalysis required only if patient is symptomatic • Monthly weight to calculate drug dosage
Documentation Requirements	Document batch numbers and expiry dates of vials in medical notes.
Adverse Drug Reactions	• Serious hypersensitivity reactions have been reported in association with infusion of Tocilizumab. • Medicinal products for the treatment of hypersensitivity reactions, e.g. adrenaline, oxygen, antihistamines and corticosteroids should be available for immediate use in the event of an allergic reaction during administration.
Disposal	Dispose of infusion bag and administration set in purple-lidded bin.
Additional Information	Prescribers should round dose to nearest whole vial.

Information provided relates to Roactemra®(Roche) Avtozma (Celltrion) last updated 6/8/26

This information has been summarised to act as a guide for those administering IV medication. The monograph should be used in conjunction with the drug data sheet and BNF for information on dose, adverse effects, cautions and contra-indications. Further information is available from Pharmacy on 22146 or 22542